



Allergy Services

VLSI LTD.
SOUTH CORK INDUSTRIAL ESTATE
VICARS ROAD, CORK

SIT VACCINE PRESCRIPTION

Email to info@vlsi.ie



DATE OF ORDER:

PANEL RESULTS LAB NUMBER (PREVIOUS)

VACCINE LAB NUMBER (NEW)

ANIMAL DETAILS

Animal Name

Owner's Surname

Species

Breed

PRACTICE

Shipping Address

Contact Number

Submitting Veterinary Surgeon (PRINT)

I would like to place an SIT vaccine order for the client detailed above:

[please tick]

a specific immunotherapy vaccine [FIRST COURSE]

REFILL of a previously ordered vaccine

Signed: _____

[Submitting Veterinary Surgeon]

Date: _____

- ◆ Please ensure that the basic allergy screen and differentiation has been carried out with us or include allergy screening results with this order.
- ◆ Fax this order back to the lab. Vaccines are made to order and can take up to 4 weeks. Vaccines will be shipped by courier.
- ◆ Please notify us as soon as possible if you wish to cancel your order. Orders in process cannot be refunded.
- ◆ Needles and syringes are supplied with the vaccine kit.

FOR OFFICIAL USE	DATE	SIGNED
PRES REC		
VAX ORDERED		
CONFIRMATION		
VAX REC/SENT		
TAT		
TRACKING NUMBER		